

REQUEST TO ENCUMBER FUNDS

Fund Name:

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This form is to be used to encumber funds to the new budget year to pay bills from the prior budget year. The Request to Encumber MUST be accompanied by proof of purchase, such as a Purchase Order, an Invoice, signed contract, or other definite proof. The encumbered funds may only be used for the purpose or intent shown on this form. Attach a copy of proof of purchase before submitting.

_			AMOUNT IN WHOLE DOLLARS	
ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ON	REQUESTED	ALLOWED
			Date stamped	"On Receipt"
			by County Au	ditor's Office
DEDADTMENIT.				
DEPARTMENT:	_			
SIGNATURE:				
SIGNATURE:				
DATE:				